

Child Day Care Certification Standards and Checklist

Completion of this form meets the requirements of Chapter DWD 55 of the Wisconsin Administrative Code
Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.4 (1)(m)].

Care Will Be Provided In: (check one)

- ☐ Child's home
☐ Provider's home

Applicant Last Name	First Name	MI	Telephone ()
Street Address	City	Zip Code	E-mail

APPLICATION PROCESS

Check "yes" or "no" below for each standard; check "N/A" if a standard does not apply to you.

DWD Rule No.

- ☐ Yes ☐ No ☐ N/A 55.04(7)(b)2.c New applicants. The certifying agency has given me information on child care and the certification system. The information included materials on Sudden Infant Death Syndrome (SIDS), child development, positive discipline, health and safety, and nutrition.
- ☐ Yes ☐ No ☐ N/A 55.04(7)(b)2.d I understand that the certifying agency must conduct an on-site inspection of the place where the care will be provided before certification or within 30 days following initial certification, recertification, or a provider's move to a new location. If I move to a different location, I will inform the certifying agency well in advance.
- ☐ Yes ☐ No ☐ N/A 55.04(7)(b)2.e I understand that a certifying agency must check criminal records history on the applicant, employees, assistants, substitutes and for adults living in the certified home (includes resident children 12 and older).
- Adults in my home:
- Children 12 and older living in my home:
- Substitutes, employees and assistants:
- ☐ Yes ☐ No ☐ N/A 55.04(3)(c) I have submitted a "Background Information Disclosure" form for each person to the certifying agency.
- ☐ Yes ☐ No ☐ N/A 55.04(7)(b)2.h I am also licensed/certified as a _____
(list any license or certification to care for children or adults, including foster care or adult care). I have requested a statement from the above regulating agency indicating that they approve a child care business in my home. Name of regulating agency:
- ☐ Yes ☐ No ☐ N/A Certification continuation: I will submit an application and other required materials to the certifying agency 30 days prior to the end of the current certification period.

Child Day Care Certification Standards and Checklist

CONDITIONS ON CERTIFICATE

DWD Rule No.

☐ Yes ☐ No ☐ N/A

Currently certified providers: (check all that apply)

My certification has ☐ exceptions ☐ restrictions ☐ stipulations.

Type of condition:

PROVIDER QUALIFICATIONS

DWD Rule No.

☐ Yes ☐ No ☐ N/A 55.08(1)(a)1

I am 18 years of age or older and physically and emotionally able to provide responsible child care.

☐ Yes ☐ No ☐ N/A 55.08(1)(a)2

I will ensure that no person (provider, household member, volunteer, visitor or parent), who has symptoms of illness or of a communicable disease reportable under Chapter HFS 145 that may be transmitted through normal contact, may be in contact with the children in care.

☐ Yes ☐ No ☐ N/A 55.08(1)(a)3

I will demonstrate that I am free from tuberculosis prior to certification. Date of test:

☐ Yes ☐ No ☐ N/A 55.08(1)(b)2.a

I have completed the 15-hour certification training. Date completed:

☐ Yes ☐ No ☐ N/A 55.08(1)(b)2

My county/tribe requires 5 hours of continuing education each year. If "yes", list events attended during the last certification period:

☐ Yes ☐ No ☐ N/A 55.08(1)(b)2

I provide care for infants under 12 months. ☐ Yes ☐ No
If yes, I have received training on SIDS (this requirement includes assistants, substitutes and volunteers). Date of completion:

☐ Yes ☐ No ☐ N/A 55.08(1)(c)

Reporting changes. I will report immediately to the certifying agency any changes that affect my eligibility for certification. The changes that must be reported are (but not limited to):

- Change in individuals living in the home
- New prospective employees (substitute, volunteers, assistants)
- If any one in the home or an employee has been arrested, convicted or is under investigation for any offense, including child abuse and neglect.
- Address or phone number change

HOME SAFETY *(If the care is provided in the child's own home, answers are optional.)

DWD Rule No.

☐ Yes ☐ No ☐ N/A 55.08(2)(a)

*Each floor level used for child care has at least one unblocked exit and at least one smoke detector.

☐ Yes ☐ No ☐ N/A 55.08(2)(b)

*All areas used for child care have adequate and safe heat, light and ventilation.

☐ Yes ☐ No ☐ N/A 55.08(2)(c)

My home is free of hazards. I will keep the following items inaccessible to the children.

- ☐ Medication and drugs
- ☐ Cleaning supplies, poisons, and insecticides
- ☐ Guns, ammunition, knives, scissors and sharp objects
- ☐ Matches, cigarette lighters and flammable liquids
- ☐ Plastic bags
- ☐ Litter and rubbish

I understand that the above list is not inclusive and that the certifying agency may point out other safety concerns not listed above.

Child Day Care Certification Standards and Checklist

- | | | | | |
|------------------------------|-----------------------------|------------------------------|--------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(cm) | Fire arms and ammunition materials are locked, stored separately from each other, and are inaccessible to children. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(d) | *Indoor and outdoor areas used for child care include sufficient space for play and for activities that meet the developmental needs of the children in care. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(e) | Outdoor play areas are free of hazards. My yard is fenced: <input type="checkbox"/> Yes <input type="checkbox"/> No
If "no", I will take the following measures to ensure the safety of the children: |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(e)1 | I do not have concrete and asphalt under climbing equipment, swings and slides. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(e)2 | I will not use in-ground pools, on-ground pools with rigid sides, hot tubs, and large outdoor trampolines during hours of care. These items are inaccessible to children by use of a permanent barrier or other preventive measure. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(e)3 | If I use wading pools, I will change the water and disinfect the pool daily. "Wading pool" means a shallow pool, capable of being dumped to change water and used primarily for small children. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(f) | *Pets that are kept in my home are tolerant of children and vaccinated against rabies. I have the following pets:
Dates rabies expire: |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(g) | *I have at least one telephone in working order with a list of emergency numbers posted by each telephone, including numbers for the rescue squad, police, fire station, emergency medical care and poison control center. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(i) | *The home is kept clean, uncluttered and free of insects and rodents. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(j) | *Bathrooms, including toilets, sinks and potty chairs, are clean and in good working condition. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(k) | *My water is safe because:
<input type="checkbox"/> It comes from a public water system
<input type="checkbox"/> It was tested by a certified laboratory for bacteriology safety and tested to have safe nitrate level. Date next test required: |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(l) | Areas, equipment and utensils for food preparation, serving and clean up are kept clean and sanitary. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(m) | *Children will not share cups, eating utensils, washcloths or towels. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(n) | Smoking is prohibited in any indoor or outdoor area in which children are present. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(2)(o) | I rent the property where the care is given. If yes, name and phone of landlord: |

HEALTH CARE

DWD Rule No.

- | | | | | |
|------------------------------|-----------------------------|------------------------------|----------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4) | <p>I will have a current report of health exam on file for all children, including my own, under the age of 5, or who are not enrolled in a public or private school prior to or within 90 days after the child is admitted. Exams are required every six (6) months after admission for children under age two (2) and within the past two years for children age 2 and older.</p> <p>Note: Children participating in Health Check or other screening programs approved by the Department meets these requirements.</p> |
|------------------------------|-----------------------------|------------------------------|----------|---|

Child Day Care Certification Standards and Checklist

- | | | | | |
|------------------------------|-----------------------------|------------------------------|-------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4)(e) | I will have a current immunization record on file within 30 days after care begins for each child in care, including my own children. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4)(f) | I will give prescription and non-prescription medication only when I have written, signed permission from the parent. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4)(g) | I will wash my hands with soap and warm water after toileting, prior to food preparation and after diapering children. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4)(h) | I will require all children to wash their hands with soap and warm running water before eating and after toileting. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4)(i) | I will change a child's diaper on an easily cleanable surface that is cleaned with soap and water and a disinfectant solution after each use. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(4)(j) | I will clean a child's superficial wound with soap and water only and protect it with a band-aid or bandage. |

SUPERVISION

DWD Rule No.

- | | | | | |
|------------------------------|-----------------------------|------------------------------|-------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(a) | I will not be engaged in any other activity or occupation during the hours of child care which interferes with the adequate care and supervision of children. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(b) | I will be awake at all times the children in care are awake. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(c) | I can only care for children up to 16 hours per day. My hours and days of operation are: |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(d) | I will ensure that each child has adult supervision at all times. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(e) | I will ensure that no person under 18 years of age is left in sole charge of children. I will notify the certification agency if I hire a substitute on a regular, weekly basis. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(f) | I will ensure that no person working with children consume or be under the influence of alcoholic beverages or any non-prescribed controlled substance during the hours of care. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(g) | I will ensure that no person in my home will consume or be under the influence of alcoholic beverage or any other non-prescribed controlled substance during the hours of operation in the presence of children. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(h) | All visitors and members of my household shall be in physical and mental health that will not bring harm to the health and well-being of the children in my care. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(5)(i) | I will keep a written record of the daily hours of attendance of each child in care, including the arrival and departure times for each child. I will store the attendance records for at least 3 years. |

GROUP SIZE

The certified provider may care for up to three children under the age of 7 years who are unrelated to the provider. The maximum size of a group of children in certified care is six (6). The provider's natural, adopted and foster children age 7 years and older are not counted in the group size. The number of children under age two (2) may place further limitations on the group size.

DWD Rule No.

- | | | | | |
|------------------------------|-----------------------------|------------------------------|----------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 55.08(6) | I will provide care in accordance with the group size and age limitation as indicated in the chart below. I understand that licensure is required whenever 4 or more unrelated children are cared for in one household, even if there are multiple providers caring for the children at the same time. |
|------------------------------|-----------------------------|------------------------------|----------|--|

Child Day Care Certification Standards and Checklist

MAXIMUM NUMBER OF CHILDREN IN CERTIFIED DAY CARE			
Related Children Under 7 Years of Age	Non-Related Children Under 7 Years of Age	Additional Children 7 and Older	Maximum Number of Children*
0	3	Additional children ages 7 through age 12 (if special needs up to 19) may be cared for as long as the maximum total number of children is not exceeded	6
1	3		6
2	3		6
3	3		6
4	2		6
5	1		6
6	0		6
*The maximum number does not include the provider's natural, adopted or foster children 7 years of age and older			
WHEN CHILDREN UNDER AGE OF 2 YEARS ARE PRESENT			
Number of children under 2 years of age		Maximum number of children**	
0		6	
1		6	
2		6	
3		5	
4		4	
**The maximum number does not include the provider's natural, adopted or foster children 7 years of age and older			
Note: Under s. 48.65 (1), Wisconsin Statutes, if a provider takes care of 4 or more children under the age of 7 who are not related to the provider, for compensation, the provider must obtain from DHFS BRL a license to operate a day care center. "Related" means the provider's natural, adopted or foster children, stepchildren, grandchildren, brothers, sisters, first cousins, nephews, nieces, uncles and aunts.			

PROVIDER INTERACTIONS WITH CHILDREN

DWD Rule No.

- | | | |
|---|-------------|---|
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7) | I will interact with the children in a caring and positive manner. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(a) | I shall protect children in care from danger and be aware of where each child is at all times. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(b) | I will not hit, spank, pinch, shake or inflict any other form of corporal punishment on any child. I will not use any discipline which is frightening to a child such as binding or trying to restrict the child's movement or enclosing the child in a confined space such as closet, basement, locked room, box or similar cubicle. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(c) | I will not verbally abuse or threaten a child or make derogatory remarks about the child or a child's family. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(b) | I will provide positive guidance and redirection for the children and will set clear limits for the children. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(e) | I will help each child develop self-control, self-esteem and respect for the rights of others. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(f) | I will not use time-outs that exceed 5 minutes. |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | 55.08(7)(g) | I will not punish a child for lapses in toilet training. |

Child Day Care Certification Standards and Checklist

INFANT/TODDLER CARE

DWD Rule No.				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(7)(h)	I will respond promptly to a crying infant or toddler's needs.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(7)(l)	I will provide physical contact and attention to each infant and toddler throughout the day, including holding, rocking, talking to, singing to, and taking on walks inside and outside the home.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(7)(j)	I will periodically change the position and location in the room of a non-walking child who is awake.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(8)(a)	<p>I will offer a program of learning and play activities geared to infants/toddlers:</p> <ul style="list-style-type: none"> Activities specifically for children under one year of age. My daily activities for infants under 1 include: My daily activities for children between one year and two years include: I will encourage infants and toddlers to play with a variety of safe toys and objects. Samples of infant/toddler toys: I will give a non-walking child who can creep or crawl opportunities during each day to move freely by creeping and crawling in a safe, clean, open, warm and uncluttered area.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(11)(c)	In order to reduce the risk of SIDS, I will place each child under one year of age on his/her back, unless otherwise directed by the child's physician. The infants in my care will be napping on a firm mattress and I will not allow soft bedding materials, such as comforters, pillows, fluffy blankets, or stuffed toys.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(12)(g)	I will have parents complete a "Day Care Intake For Child Under Two (2) Years" form number DWSW-13133 for each child under age 2 years of age and I will use the information provided to individualize the program of care.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(11)(c)	I will make sure that a safe crib or playpen is provided for each child under one year of age for napping.

ACTIVITY AND EQUIPMENT

DWD Rule No.				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(8)(a)	I will offer a program of learning and play activities.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(8)(a)1	I will offer a balance of active and quiet play for each child daily.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(8)(a)2	I will offer both indoor and, weather permitting, outdoor activities for each child daily, including infants and toddlers.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(8)(a)3	I will offer opportunities and encouragement for each child to play with a variety of toys and equipment.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	55.08(8)(a)4	I will read to the children daily.

Child Day Care Certification Standards and Checklist

☐ Yes ☐ No ☐ N/A 55.08(8)(a)5

I will offer opportunities for each child to be involved in a variety of activities during a week. Below is a list of activities that I provide to enhance various important skills.

- Creativity:
- Language development:
- Large motor skills:
- Small motor skills:
- Imagination:

☐ Yes ☐ No ☐ N/A 55.08(8)(a)6

I will offer activities specifically for children 2 years and older. My daily activities for children over 2 include:

☐ Yes ☐ No ☐ N/A 55.08(8)(b)

I will use television only to supplement the daily plan for children. No child may be required to watch television.

TRANSPORTATION

DWD Rule No.

☐ Yes ☐ No ☐ N/A 55.08(9)(a)&(b)

I will ensure that any time children are transported, the driver will have a valid driver's license and the vehicle used will be registered in Wisconsin.

☐ Yes ☐ No ☐ N/A 55.08(9)(c)

I will make sure that each child under age four (4) is in a child car safety seat and children age four (4) and older will wear seat belts.

☐ Yes ☐ No ☐ N/A 55.08(9)(d)

I will have a written permission slip signed by a parent or guardian on file.

☐ Yes ☐ No ☐ N/A 55.08(9)(e)

I will not leave children unattended in a vehicle.

NUTRITION

DWD Rule No.

☐ Yes ☐ No ☐ N/A 55.08(10)

I will ensure that each child receives proper nourishment while in day care. I have received child nutrition guidelines from my certifying agency and agree to follow them.

☐ Yes ☐ No ☐ N/A 55.08(10)(a)

I will serve each child a meal or a snack at least once every 3 hours.

☐ Yes ☐ No ☐ N/A 55.08(10)(b)

I will serve each child in attendance for 4 or more hours a noon or evening meal, which consists of a protein food, fruit and vegetable, a cereal or bread product and pasteurized grade A vitamin D milk.

☐ Yes ☐ No ☐ N/A 55.08(10)(c)

I will hold infants for bottle feeding if they cannot hold their own bottle. I understand that the bottles may not be propped.

Child Day Care Certification Standards and Checklist

REST

DWD Rule No.

- ☐ Yes ☐ No ☐ N/A 55.08(11)(a) I will let each child rest or nap undisturbed whenever s/he has a need to do so in a place that is clean, safe and comfortable.
- ☐ Yes ☐ No ☐ N/A 55.08(11)(b) I will provide each child with a clean sheet and/or blanket and pillow case if a pillow is used. The children will nap on:

PROVIDER AND PARENT COMMUNICATION

DWD Rule No.

- ☐ Yes ☐ No ☐ N/A 55.08(12)(a) I allow parents to visit and observe my child care during any hours that care is being provided.
- ☐ Yes ☐ No ☐ N/A 55.08(12)(b) I will talk to each child's parent at least once a week about his/ her child's development, activities, likes and dislikes.
- ☐ Yes ☐ No ☐ N/A 55.08(12)(c) I have written policies that specifies the fee for care and when the fee is due.
- ☐ Yes ☐ No ☐ N/A 55.08(12)(d) I will make a copy of the certification standards available to parents by:
☐ Completing a Parent/Provider Checklist
☐ By giving the parent a copy of this checklist
- ☐ Yes ☐ No ☐ N/A 55.08(12)(e) I will display my day care certificate of approval in an area easily seen by parents and visitors.
- ☐ Yes ☐ No ☐ N/A 55.08(12)(f) I am using an enrollment form for each child in care, which includes:
☐ Parents' home and work numbers
☐ Parents' signed consent for emergency medical care
☐ A name and number to call if the child requires emergency medical care
- ☐ Yes ☐ No ☐ N/A 55.08(12)(h) I will inform the child's parent of any disciplinary action taken or any injury to the child that occurred during day care hours.
- ☐ Yes ☐ No ☐ N/A 55.08(12)(i) I will inform the parent in writing whether the premises are covered by day care liability insurance.
- ☐ Yes ☐ No ☐ N/A 55.08(13) I will not discriminate on the basis of race, color, sex, sexual orientation, creed, handicap or national origin or ancestry in accepting children or when hiring employees.
- ☐ Yes ☐ No ☐ N/A 55.08(14) If I suspect that a child in my care has been abused or neglected or that the child has been threatened with abuse, I will immediately inform the county social or human services department or local law enforcement.
- ☐ Yes ☐ No ☐ N/A 55.08(15) I will permit a day care certification worker to conduct home inspections to monitor compliance with the certification standards.

I attest that all information given on this checklist is true and accurate, to the best of my knowledge.

Applicant Signature	Date Signed
Certifier Signature	Date Signed